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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

NONE O.A.

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE O.A.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>Ol' Bg Anws</i> Initials: <i>OA</i>	PA	5	23	5

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## TITLE

Customer premises equipment that can support multiple call control languages or multiple call agents

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees ( Filing )
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